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TALLAHASSEE, FL 32310

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DELRAY NAILS, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PHU NGUYEN, Manager  
(Name of Person)

DELRAY NAILS, LLC  
(Firm/Company)

4055 West Atlantic Blvd  
(Address)

Delray Beach, Florida 33445  
(City/State and Zip Code)

For further information concerning this matter, please call:

PHU NGUYEN, Manager at ( 561 ) 436-8156  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|---|---|

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

FBI/DOJ

**ARTICLES OF ORGANIZATION**  
**OF**  
**DELRAY NAILS, LLC.**

**ARTICLE I - Name**

The name of the Limited Liability Company is DELRAY NAILS, LLC

**ARTICLE II - Principal Office and Address**

The mailing address and the street address of the principal office of the Limited Liability Company are

4055 W. ATLANTIC AVE.  
DELRAY BEACH FL 33445

The Managing Member (s) may, from time to time, move the principal office to any other address in the State of Florida, and establish branch offices in any places within the state of Florida, as the said Limited Liability Company desire.

**ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature**

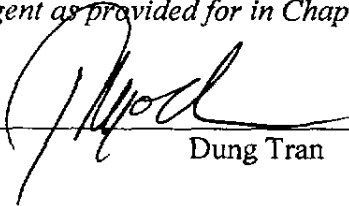
The name and the Florida Address of the Registered Agent are

DUNG TRAN  
9543 Campi Drive  
Lake Worth, Florida 33467

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*Having been named as Registered Agent and to accept service of process for the above stated limited liability Company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 68, F.S.*

X

  
Dung Tran

DATE

8-17-05

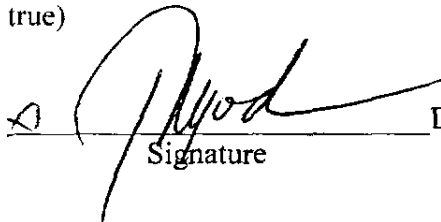
**ARTICLE IV - Manager(s) or Managing member(s):**

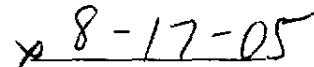
The name and address of the Manager (MGR) and Managing member(MGMR) is as follows

- 1) Phu Nguyen , MGR 9543 Campi Drive, Lake Worth, FL 33467
- 2) Dung Tran , MGMR 9543 Campi Drive , Lake Worth, FL 33467

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(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

 \_\_\_\_\_ Dung Tran  
Signature

 \_\_\_\_\_  
Date

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